PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

NSTRUCTIONS: This form should be used for transmitting the ISSUE FEB and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where preparate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by all specifying a new correspondence address; and/or (b) indicating a separate "FeE ADDRESS" for

naintenance lee nourica							
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
23657	7590 07/01	1/2008	13	ave as own certificate	of maining of transmissi	ion.	
				Cer	tificate of Mailing or T	ransmission	
COGNIS COR			1	hereby certify that th	is Fec(s) Transmittal is	being deposited with the Unit or first class mail in an envelo dress above, or being facsim the date indicated below.	tec
PATENT DEPARTMENT				tates Postal Service w	ith sufficient postage for	r first class mail in an envelo	pe
300 BROOKSIDE AVENUE				ansmitted to the USP	TO (571) 273-2885 on	ress above, or being facsim	ille
AMBLER, PA			ſ		(0.17) 213 2005; 011	(Depositor's nam	_
						(Signatus	re)
			L			(Dat	te)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENT	OR .	ATTORNEY DOCKET N	O. CONFIRMATION NO.	=
10/656,341	09/05/2003		Stephen F. Gross		M 6636 US2 C041	7801	_
TILE OF INVENTION	i: graffiti removei	R, PAINT STRIPPER, D	EGREASER				
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	E PREV. PAID ISSUE	FEE TOTAL FEE(S)	DUE DATE DUE	٦
nonprovisional	NO	\$1440	\$300	\$0	\$1740	10/01/2008	
EXAM	IINER	ART UNIT	CLASS-SUBCLASS]			
		1796	510-201000				
. Change of correspondence address or indication of "Fee Address" (37 FR 1.363).				printing on the patent front page, list			
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,				
			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to				
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or	type)			_
PLEASE NOTE: Uni recordation as set fort	less an assignee is ident h in 37 CFR 3.11. Com	ified below, no assignee	data will appear on the	patent. If an assigne	e is identified below, t	the document has been filed i	for
(A) NAME OF ASSIG			(B) RESIDENCE: (CITY and STATE OR COUNTRY)				
Cogni	s IP Manageme	nt GmbH	Dusseldorf, Germany				
lease check the appropr	iate assignce category or	categories (will not be pr	rinted on the patent):	☐ Individual ☐ Co	rporation or other privat	te group entity Governme	nt
a. The following fee(s)	are submitted;	41	b. Payment of Fee(s): (P		y previously paid issue	fee shown above)	
☑ Issue Fee			A check is enclosed.				
Publication Fee (No small entity discount permitted)			Payment by credit card. Form PTO-2038 is attached.				
Advance Order - # of Copies			The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 19-5425 (enclose an extra copy of this form).				
	tus (from status indicated		_				_
	s SMALL ENTITY statu				L ENTITY status. See 3		
OTE: The Issue Fee and iterest as shown by the	d Publication Fee (if requeecords of the United Sta	uired) will not be accepte tes Patent and Trademark	d from anyone other than Office.	the applicant; a regis	tered attorney or agent;	or the assignee or other party	in
Authorized Signature	/Joseph F.	Posillico		Date Oct	tober 1, 2008	_	
Typed or printed nameJoseph F. POsillico			Registration No. 32,290				
his collection of inform application. Confident ibmitting the completed is form and/or suggesti ox 1450, Alexandria, V	ation is required by 37 C tiality is governed by 35 1 application form to the ons for reducing this bur irginia 22313-1450. DO 13-1450.	FR 1.311. The informatic U.S.C. 122 and 37 CFR USPTO. Time will vary den, should be sent to the NOT SEND FEES OR	on is required to obtain of 1.14. This collection is a depending upon the ince Chief Information Off COMPLETED FORMS	r retain a benefit by the estimated to take 12 m lividual case. Any con- icer, U.S. Patent and 7 TO THIS ADDRESS.	te public which is to file ninutes to complete, incl numents on the amount of rademark Office, U.S. SEND TO: Commission	(and by the USPTO to proces luding gathering, preparing, an of time you require to comple Department of Commerce, P.0 oner for Patents, P.O. Box 145	is) nd te O.

nder the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.